

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lsh		02/09/01
O.I.P.E. CLASSIFIER		12	2/2/01
FORMALTY REVIEW	AM	896	04/04/01
RESPONSE FORMALTY REVIEW	AM	1080	6-21-01

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 □ ----- Allowed I ----- Interference
 - (Through numeral) ----- Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

Claim	Date
1	5/15/01
2	5/15/01
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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